

Applicant																			
Name																			
Street																			
Street																			
City					State														
Zip																			
										Residence									
										Business									
										Fax									
Cell																			
E-Mail																			
										<b>Registered Owner of Vessel (if different)</b>									
					Name														
					Street														
<b>Lienholder</b>					Street														
Name					City				State										
Street					Zip														
Street																			
City					State					Phone	-								
Zip					Phone						Fax	--							
<b>Named Operators</b>																			
First				Middle			Last				DOB								
Drivers Licence							Date of Last MVR												
Years Operated				USPS #				Coast Guard #											
First				Middle			Last				DOB								
Drivers Licence							Date of Last MVR												
Years Operated				USPS #				Coast Guard #											
First				Middle			Last				DOB								
Drivers Licence							Date of Last MVR												
Years Operated				USPS #				Coast Guard #											



**PRIVATE PLEASURECRAFT APPLICATION**

Vessel Information														
Year		Make		Model		Length								
Name		Reg#		Ser#		Speed								
Unrepaired damage Y/N				If Yes, explain:										
Previously Repaired? Y / N				If Yes, explain:										
Vessel modified? Y / N				If Yes, explain:										
Type	Sail			Power										
Configuration			Construction				Last Survey							
Multi Hull			Fiberglass			Date Purchased								
Performance			Wood / Wood over Fiberglass			New		Used						
Runabout			Aluminum			Price including tax								
Cruiser / Yacht			Steel			Vessel Value?								
Other (describe below):			Other			Value of Personal Property Aboard								
			Boat has metal flake finish			Value of Electronic Equipment?								
Engines / Trailer / Accessories														
Fuel	Gas			Diesel			Other							
Outboard			Inboard/Outboard				Inboard			Jet Drive			Turbine	
1	Year		Make/Model		Value		HP		Ser#					
2	Year		Make/Model		Value		HP		Ser#					
3	Year		Make/Model		Value		HP		Ser#					
4	Year		Make/Model		Value		HP		Ser#					
Are Engines modified or customed Y / N							Total HP							
Trailer														
Year		Make		Ser#		Value								
Accessories - Tender														
Year		Make		Model		Length								
Ser#						Value								

Accessories - Engine											
Year		Make		Model		HP					
Ser#				Value							
Accessories - Other											
1							Value				
2							Value				
3							Value				
Operation / Storage											
Mooring Address						Layup					
Area of operation	As stipulated in standard policy wording			NAVIGATION LIMITS							
	Other than above										
Describe other											
Use of Vessel											
Passengers for Hire Carried?	Y / N	How many?			Gross Receipts?	\$					
Overnight Trips	Y / N	How many?									
Live Aboard?	Y / N	How many per yr?									
Paid Crew?	Y / N	How Many?			Payroll?						
Chartered with Crew?	Y / N	Chartered without Crew?	Y / N		How Many Days per year?						
Safety Equipment				Appliances							
Alarm				Stove		Electric		Propane			
GPS Theft System				Heater		Electric		Propane			
Prop Lock				Fridge		Electric		Propane			
Trailer Wheel Lock				If any Propane, check all that apply:							
Drive Lock						Pilot Light		Auto shut off			
Other				Emer shut off		Gas sniffer					

### Schedule of Insurance

Coverage	Limit	Ded.	Rate	S/C	Premium
Vessel					
Machinery					
Dinghy/Tender & Outboards					
Trailer					
Medical Payments					
Personal Property					
Liability					
				<b>Total Premium</b>	

### Additional Coverage

Coverage	Limit	Ded.	Rate	S/C	Premium
Additional Equipment					
Accidental Death					
Captain's Personal Property					
Captain and Crew Liability (non-Jones Act)					
Captain and Crew Jones Act Coverage					

### Insurance History

Previous Insurer		Ever been Cancelled	Y / N
Policy #		If Yes, explain:	
Expiry Date			

### Claims

Date	Description	Amount

<b>Declarations and Signature</b>	
<p>The undersigned represents and warrants to the insurer, either as the registered owner, or as the person duly authorized by the registered owner to complete and sign this application on its behalf, that the statements set forth in this Application are true and correct and acknowledges that the insurer is relying solely upon such representation and warranty as the basis for any insurance that may be granted to the applicant.</p> <p>The undersigned agrees that:</p> <ol style="list-style-type: none"> <li>1) the signing of this application does not bind them, the registered owner or the insurer to effect insurance;</li> <li>2) if there is any change to the information supplied on this application between the date of this application and the effective date of the policy, notification will be sent in writing to the insurer, and any outstanding quotation may be modified or withdrawn; and</li> <li>3) the insurer is hereby authorized to make any investigation and inquiry in connection with this application that it deems necessary.</li> </ol>	<b>Signature of Applicant</b>
	<b>Signature of Agent</b>
	<b>Date</b>
	<p><b>Any person, who knowingly or with intent to defraud any insurance company or other person, files an application for insurance containing false information, or conceals for the purpose of misleading the insurer, information concerning any fact material thereto, commits a fraud.</b></p>